a FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number	3235-0076						
Expires:	April 30, 2008						
Estimated avera	ge burden						
hours per respor	nse 16.00						

370212

SEC USE ONLY									
Prefix	Serial								
DATE	RECEIVED								

Name of Offering () check if this is an amendment and name has changed, and indicate change.) Issuance Convertible Promissory Notes	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA 🕻 🤾	MAY 2 2 2000
Enter the information requested about the issuer	X
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) NeoEdge Networks, Inc.	186
Address of Executive Offices (Number and Street, City, State, Zip Code) 215 Castro Street, 2nd Floor, Mountain View, CA 94041	Telephone Number (Including Area Code) (650) 833-8143
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Digital content delivery	- HOOESSED
Type of Business Organization	1014 0 \ 5007
corporation limited partnership, already formed	Ligher (please specify):
business trust limited partnership, to be formed	FINANCIAL
Actual or Estimated Date of Incorporation or Organization: Month Year 05 02	Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for CN for Canada; FN for other foreign jurisdiction)	or State: D E

GENERAL INSTRUCTIONS

Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICAT	ION DATA	· · · · · · ·			
2. Enter the information req	uested for the fol	lowing:			
 Each promoter of the 	e issuer, if the iss	suer-has been organized wi	thin the past five years;		
 Each beneficial ov securities of the issu 		power to vote or dispose	e, or direct the vote or d	isposition of, 10%	% or more of a class of equity
Each executive office	cer and director o	f corporate issuers and of o	corporate general and mana	iging partners of p	artnership issuers; and
Each general and m	anaging partner o	f partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Terry, Alex	if individual)				
Business or Residence Addr 215 Castro Street, 2nd Floo			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Woods, Steven	if individual)				
Business or Residence Addr 215 Castro Street, 2nd Floo	•		de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Babiak, Michael	if individual)				
Business or Residence Addr 215 Castro Street, 2nd Floo	-		de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Quilici, Alex	if individual)				
Business or Residence Addr c/o 215 Castro Street, 2nd	•		de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Zeisig, Bernhardt	if individual)				
Business or Residence Addr 177 Milk St., Boston, MA (Street, City, State, Zip Coo	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Cope, David	if individual)				
Business or Residence Addrec/o 215 Castro Street, 2nd			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Bushnell, Nolan	if individual)				
Business or Residence Addrec/o 215 Castro Street, 2nd		• • • • • • • • • • • • • • • • • • • •	de)		

A. BASIC IDENTIFICA	TION DATA				
2. Enter the information re	quested for the fo	llowing:			
• Each promoter of	he issuer, if the is	suer has been organized wi	ithin the past five years;		
 Each beneficial o securities of the is: 		power to vote or dispose	e, or direct the vote or d	isposition of, 10%	% or more of a class of equity
Each executive off	icer and director	of corporate issuers and of	corporate general and mana	iging partners of p	artnership issuers; and
Each general and to	nanaging partner	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first Jefferson Partners (and a					
Business or Residence Add 260 Queen Street West, 4			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first VIMAC Ventures LLC (a		ties)			
Business or Residence Add 177 Milk St., Boston, MA		Street, City, State, Zip Co.	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first	if individual)				
Business or Residence Add 4085 County Rd 88, Brad			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Clancy, Joe	if individual)		· · · · · · · · · · · · · · · · · · ·		
Business or Residence Add #708-50 Alexander Street,			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Kenck, Todd	if individual)				
Business or Residence Add 215 Castro Street, 2nd Flo			de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, Vandenbosch, Kristi	if individual)				
Business or Residence Add c/o 215 Castro Street, 2nd		-	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de)		

								B.	INF	ORM/	ATIC	N AB	OUT OFF	ERI	NG								
1 Has	the ic	suer so	ld o	r does :	the is	scuer in	itend	to sell	to n	011-9001	redite	d inves	stors in this	offe	rina?							Yes	
i. Has	the is	suci su	iu, 0										der ULOE.		amg:		********		**********		••••••	Ш	\boxtimes
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3. Do		_	-	-				_												•		\boxtimes	
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Full Na	me (L	ast nam	e fir	st, if in	divid	dual)																	
Busines	s or R	esidenc	e Ac	ldress	(Nun	nber an	d St	reet, Ci	ty, Si	ate, Zi	р Со	de)							-				
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Full Na	me (L	ast nam	ie iir	Si, II III	laivi	uuai)																	
Busines	s or R	esidenc	e Ac	idress	(Nun	nber an	d St	reet, Ci	ty, Si	ate, Zi	p Co	de)											
Name o	f Asso	ciated	Brok	er or I	Deale	r							-										
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		[IN]		[IA]		[KS]		[KY]		[LA]		[ME]	☐ [MD]		[MA]		[MI]		[MN]		[MS]		[MO]
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Busines	s or R	esidenc	e Ad	ldress	(Nun	nber an	d Sti	reet, Ci	ty, St	ate, Zi	р Со	de)											
Name o	f Asso	ciated	Brok	er or I	Deale	r								•		×·							
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(1) All solicitations in the United States (Connecticut, Illinois, Massachusetts and New York) were made by Dundee Securities Inc., the U.S. affiliate of Dundee Securities Corporation.

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	1	Amount Already Sold
	Debt	\$ 0.00	\$	0.00
	Equity		\$	0.00
	☐ Common ☐ Preferred		•	
	Convertible Securities (including warrants)	\$ 4,484,789.11	\$	4,484,789.11
	Partnership Interests	\$0.00	\$	0.00
	Other (Specify:)	\$0.00	\$	0.00
	Total		\$	4,484,789.11
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		of Purchases
	Accredited Investors	7	\$	4,484,789.11
	Non-Accredited Investors	0	\$	0.00
	Total (for filings under Rule 504 only)		\$	
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C • Question 1.			
	Type of Offering	Type of Security	D	ollar Amount Sold
	Rule 505	N/A	\$.	0.00
	Regulation A	N/A	\$	0.00
	Rule 504	N/A	\$.	0.00
	Total	N/A	\$	0.00
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\$	
	Printing and Engraving Costs		\$.	
	Legal Fees	🗵	\$.	25,000.00
	Accounting Fees		\$	
	Engineering Fees		\$	
	Sales Commissions (specify finders' fees separately)		\$	
	Other Expenses (identify)		\$	· · · · · · · · · · · · · · · · · · ·
	Total	_	\$	25,000.00

_	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES A	ND U	SE OF PROCEED	S	6
	Question I and total expenses furnished i	te offering price given in response to Part C – in response to Part C - Question 4.a. This s to the issuer."			\$	4,459,789.11
5.	used for each of the purposes shown. If the a estimate and check the box to the left of the e	oss proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must er set forth in response to Part C – Question 4.b				
	above.			Payment to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation of	machinery and equipment		\$		\$
	Construction or leasing of plant buildings and	d facilities		\$		\$
	Acquisition of other businesses (including the that may be used in exchange for the assets o merger)			\$		\$
	Repayment of indebtedness			\$		\$
	Working capital			\$	☒	\$ 4,459,789.11
				\$		\$
	<u> </u>			\$		s
				\$		\$
	Total Payments Listed (column totals added)			₩ \$	4,45	9,789.11
		D. FEDERAL SIGNATURE				}
sigr	nature constitutes an undertaking by the issuer	by the undersigned duly authorized person. If the to furnish to the U.S. Securities and Exchange Corredited investor pursuant to paragraph (b)(2) of the total control of the tot	ommi	ssion, upon written		
	ssuer (Print or Type)	Signature /		Date 18 2007		
	NeolEdge Networks, Inc.	- U PV		May <u>18</u> ,2007		
N	Name of Signer (Print or Type)	Title of Signer (Print or Type)				
Τe	ed S. Hoilifield	Assistant Secretary				

ATTENTION

12,		E. STATE SIGNATURE		`	
1.	Is any party described in 17 CFR 230.262 pr	esently subject to any of the disqualification provi	sions of such rule?	Yes	No ⊠
	See	Appendix, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes to Form D (17 CFR 239.500) at such times as r	furnish to any state administrator of any state in vequired by state law.	which this notice is filed, a noti	ce on	
3.	The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the state administrators, upon written r	equest, information furnished b	y the	
4.		suer is familiar with the conditions that must be sa state in which this notice is filed and understands ing that these conditions have been satisfied.			
	The issuer has read this notification and knows uly authorized person.	the contents to be true and has duly caused this no	otice to be signed on its behalf	by the und	ersigned
I	ssuer (Print or Type)	Signature	Date		
N	NeoEdge Networks, Inc.	= Q PM	Мау <u>/В</u> , 2007		
N	lame (Print or Type)	Title (Print or Type)			
	Ted S. Hoilifield	Assistant Secretary			

Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APP	ENDIX				
1	Intend To non-a investors (Part B-	to sell ccredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
ΑZ									
AR									
CA									
CO							-		
СТ								!	
DE									
DC									
FL					•				
GA									
НІ									
ID									
IL DI									
IN	ļ								
IA	ļ								
KS									
KY									

				API	PENDIX				
1	Intend To non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)			5 Disqualification Under State ULOI (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Accredited Investors Amount Investors Amount					No
LA_									
ME									
MD									
MA		Х	Convertible Promissory Notes \$4,484,789.11	1	\$1,815,205.47	0	0.00		Х
MI_									
MN									
MS									
мо									
MT_									
NE								,	
ΝV									
NH_									
NJ									
NM_									
NY									
NC									

			API	PENDIX				
1	Intend to sell To non-accredited investors in State (Part B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of amount pu (Part	4 investor and rchased in State C-Item 2)		Disquali Under Sta (if yes, explana waiver g (Part E-	fication ate ULOE attach ation of granted)
ND								
ОН								
OK								
OR								
PA								
RI								
SC				_	<u> </u>			
SD								
TN								
						·		
TX		• • • • • • • • • • • • • • • • • • •				<u></u>		
UT								
VT_								
VA								
WA_								
WV_		·						
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WY		·						
PR								

^{* \$2,669,583.64} issued to investors resident in Canada.

END